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Passed March 17<sup>th</sup> 1826

ESSAY  
ON  
HEMOPTESES.

BY  
David Bohman.

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or

DEPOSITIONS

in

the case of

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AN

*Inaugural Dissertation*

ON

*Pharyngitis;*

SUMMARIZED

*In the examination  
of the*

Revd Frederick Beasley, DD. Probst;

*The Trustee*

*and Medical Faculty of the University of Pennsylvania.*

*On the day of 182*

*For the degree of Doctor of Medicine.*

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By David Bohman Of

PHILADELPHIA.

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*Sit michi fas audita loqui..... Virg<sup>l</sup>*

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Preface.

In entering upon the consideration of a disease at once so interesting and important, I cannot but feel under great, and almost insurmountable difficulties, arising from the necessarily limited state of my knowledge, augmented by an almost total want of experience, particularly such as would lend to the lucid investigation of a subject, offering so wide a field of inquiry and research. Aware of this together with the inability on my part properly to perform the task before me, I have to beg the lenity of a candid and discerning faculty, under whose observation and inspection this imperfect attempt to comply with their requisitions may come. The necessity, however, of submitting it to the rigid-scrutiny of such a body, induces me to do so (though reluctantly) with the utmost deference and respect.

*[Faint, illegible handwriting, likely bleed-through from the reverse side of the page.]*

## Of Hemoptysis

Hemoptysis derived from the Greek words, *Haima*, blood, and, *ptuo*, to spit, is a genus of disease arranged by Cullen in the Class Pyrexia, order Haemorrhagica. And signifying a spitting of blood, is a discharge of blood from the mouth, brought up by mucus or left hawking & coughing. This definition, though, perhaps, somewhat exceptionable, may be considered as correct as is necessary, hence its adoption, not from any conviction of its superiority over others, but from the consideration that no two agree precisely as regards this point.

Hemoptysis may proceed from the lungs, trachea or fauces, each characterised by some pecuniative affording diagnostic marks hereafter to be mentioned. The Hemoptoe may occur at any period of life, but it most frequently happens about the age of puberty, or from sixteen to thirty years, dependent, as is supposed by



O'Callan, on the preponderance of the arterial system  
 over that of the venous. It is more frequent in Spring &  
 the beginning of Summer than at other seasons, & is not  
 infrequently of periodical occurrence. To account for the  
 latter fact, the same <sup>author</sup> supposes the over-stretched & relaxed  
 vessels more ready to admit of congestion, which being the case  
 the same phenomena follow as a necessary consequence. The  
 writings of O'Meara, and more recently those of O'Monaghan  
 lead to the opinion, that it depends on lunar influence.  
 The latter gives several cases going to establish this fact.  
 This it would appear from some barometrical observations  
 depends on the comparative levity of the atmosphere, at  
 the time of the fall & change of the moon, which we  
 know acts powerfully in causing hemorrhage. Hence the  
 more frequent occurrences of Hemoptoe, at those times  
 at any other periods.

This hemorrhage may be either active or passive. The  
 former arises from increased vascular action, the latter when  
 no increase of vascular action is perceptible a distinction



I am inclined to believe, founded upon correct principles, but  
 notwithstanding it has been denied by some, particularly by  
 Rees an English writer, who denies, that such a thing as ac-  
 tue hemorrhagy from the lungs can exist & now looks up-  
 on the opinion as Chimerical.

There are according to Cullen five species of Hemoptysis.  
 1<sup>st</sup> Hemoptysis Plethorica, 2<sup>d</sup> Hemoptysis Violenta, 3<sup>d</sup> Hemoptysis  
 Plethorica, 4<sup>th</sup> Hemoptysis Calculosa, 5<sup>th</sup> Hemoptysis Nephrica.

A more modern writer gives six, as occurring from different  
 causes 1<sup>st</sup> Occasioned by rupture, a slow or torrid. 2<sup>d</sup> By ex-  
 ceptive inflammation, 3<sup>d</sup> By metastasis, from the suppression  
 of other discharges 4<sup>th</sup> By plethora of the lungs 5<sup>th</sup> By sporadic  
 discharges & 6<sup>th</sup> By Tubercles.

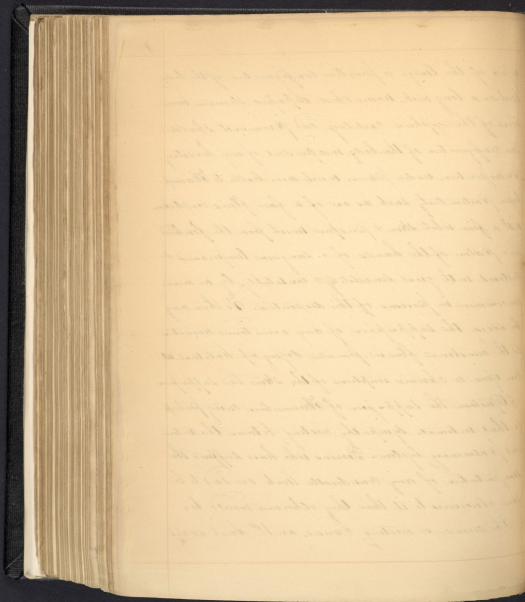
Of the Causes of Hemoptysis. These may be divided  
 into predisponent or remote, & occasional or exciting. The  
 first most of which may be considered in a great degree  
 hereditary, implying in itself some peculiarity and faulty  
 conformation; or a disproportion between the lungs and  
 other parts of the body, a laxity in the structure of the





shape of the lungs, a peculiar configuration of the body,  
 such as a long neck, narrow chest, depressed sternum, in-  
 versions of the Ziphoid cartilage, and prominent shoulders.  
 This configuration of the body, independent of any hereditary  
 predisposition, renders persons much more liable to <sup>Stomach</sup> Stomach  
 tumors. Particularly such as are of a fair, florid complexion,  
 with a fine white skin, & perspire much from the forehead  
 and palms of the hands, of a sanguine temperament &  
 endowed with great sensibility & irritability, by no means  
 uncommon in persons of this disposition. To these may  
 be added the suppression of any accustomed evacuation  
 as the menstrual flux in females; drying up habitual sal-  
 iva, or a chronic eruptions of the skin; the suppression  
 of Otorrhea, the suppression of Otorrhea, may perhaps  
 be that intimate sympathy existing between the Arterial  
 and Pulmonary system. Persons who have suffered the  
 amputation of any considerable limb are said to be  
 more obnoxious to it than they otherwise would be.

The second or exciting Causes, are 1<sup>st</sup>, Such as act



directly on the lungs, as singing, or loud speaking, long  
 continued blowing on wind instruments; wounds, blows, con-  
 gestions of the lungs, Coughs &c. 2<sup>nd</sup> Such as act on the  
 system generally, as violent exertions of any kind, running,  
 leaping, wrestling, lifting heavy weights, and other athletic  
 exercises, the application of ligatures so as to stop the cir-  
 culation, Postural positions of the body, a plethoric state of  
 the system, hectic fever, irregular living, excess in eating or  
 drinking, high excitement of the passions, external heat,  
 cold suddenly applied, great & sudden diminution in the  
 weight of the atmosphere, in short whatever increases the  
 circulation, or favours irregularities in the distribution of  
 the blood. The mode of action peculiar to most of these  
 causes is the same, viz. that of acting as a stimulus, thereby  
 accelerating the circulation, favouring any irregularity, or  
 determination otherwise insufficient, in causing hemorrhage.  
 Cold when suddenly applied, does not act as a cause by  
 repelling the blood on the internal organs, as has been asserted  
 but by the reaction of the system, in such thing as haem-  
 orrhage



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phage taking place, when cold has been so applied as to  
suffuse reaction. As regards the operation of diminished pressure  
of the atmosphere, in causing hemorrhage, the opinion of Dr  
Cullen, who supposes that it acts by causing an expansion  
or rarefaction of the circulating fluids, is doubtless correct.  
This is certainly a direct result of such domination, we do not  
know to which it may be remarked, that the vessel, kept thus  
accustomed to suffer, & consequently thus antagonising process.  
The want of oxygen to deactivate the blood may have some  
effect in producing Hemoptysis by hurrying the respiration  
to counterbalance this deficiency. If as is the opinion of some  
this hemorrhage depends on the presence of Carbon, af-  
formed by them to lessen the cohesion of the blood, a defi-  
ciency of oxygen, may be considered as causing Hemoptysis  
in this way.

Why these causes induce Hemoptysis, seems then any  
other hemorrhage, except Epistaxis, is perhaps sufficiently obvious  
when the delicate structure of the lungs, the large size of the  
pulmonary vessels, their extensive, numerous & intricate ramifica-  
-tions



tions over the bronchial cells, imbedded in the mott loops, & attenuated cellular texture, & covered only by a thin membranous envelope, and taken into consideration, there is no difficulty in understanding, why causes, acting so powerfully on the whole system, should be particularly calculated to produce ~~hemorrhage~~ <sup>hemoptoe</sup> hemorrhage in such a structure as the lung.

An attack of Hemoptoe is brought on by the above mentioned causes, is for the most part preceded by a sense of weight and anxiety about the precordia, slight difficulty of breathing, pain in the breast or some part of the thorax, a sense of heat under the sternum, a dry tickling cough, a sensation of throbbing or pulsation, & a dryness or huskiness of the mouth, fauces & throat. Immediately before the appearance of the blood, some irritation is felt at the top of the glottis which may descend lower, & it is said, some to the oesophagus & larynx. This gives rise to a hawking or coughing, which brings up more generally, thin, frothy, small in quantity, & of a fine red colour, preceded by a mucus with mucus of a lattest taste. The blood may, however, be thick and of a dark or even blackish.





ish cast, from having remained some time in the bronchial cells before it was discharged, now is the blood so fluid, & arterialized when proceeding from the trachea or fauces. This is the most frequent form of its attack, though it is sometimes ushered in with coldness of the extremities, shivering, pain in the back & loins, flatulency, costiveness, & caputudo, followed by a reaction in the system, inducing a hot stage previous to the occurrence of the hæmorrhage. The pulse is frequent, quick, full, & often hard, the face is flushed, & occasionally there is slight pain in the side. This state of the system is followed by a flow of blood sometimes large in quantity, at others, small, & simply brought up by hawking or coughing, as was before mentioned the pulse now becoming softer & less frequent. The patient is now for a longer or shorter time relieved, the irritation, however, again returns, & there is a series of phenomena similar to the former. This continues to be the case until it soon almost altogether disappears; in other cases, it recurs frequently & there is greater quantities discharged, sometimes it is profuse and tends indeed to new suffocations. This is perhaps of more



occurrences, as it for the most part subsides spontaneously or yields to the interference of art. When it does not prove immediately fatal, and is relieved, the countenance becomes pallid & haggard, the mind sinks, into the most wretched disquietude & the unhappy sufferer, robbed of the generous stimulations of life, is almost ready to sink under the weight of despondency & disease.

*Of the Pathology of hemorrhage* perhaps nothing need necessarily be said now, but, as it must ever be great influence over our method of treatment, a few remarks may not be exceptionable. By Cullen it was supposed to consist in some inequality in the distribution of the blood occasioning congestion the vessels thus becoming preternaturally distended were said to increase action which increased force acted upon the extremities of the vessels, opened them by anastomosis or rupture. That rupture may take place when the existing cause, are sudden & violent will not perhaps be denied, but, it is of much rarer occurrence than is generally believed. The capillary system is perhaps mainly concerned in hemorrhages & hence it appears as a most common occurrence a direct rupture  
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tion is effusion. Thromboses being in a state of preternatural  
 excitement allow no blood to pass but there as in inflammation,  
 action becoming more violent, blood is effused or forced through  
 the existing pores, proving as in case of dropsy, a serous  
 fluid is effused from less violent action. In purpura hemo-  
 rhagica on the contrary, there is a want of tone, a general re-  
 laxation, from the prostration or loss of that vital power ne-  
 cessary for that healthy action, consequently there is what  
 may be called atonic exudation, (which though extremely  
 rare is sometimes seen,) as in scorbutic hemorrhage, the  
 patches of low feces, small pox & particularly from the  
 bite of some venomous reptiles.

The Diagnosis, though sometimes difficult, compar-  
 haps, always with proper attention to the circumstances of the  
 case be made with some degree of accuracy, and correctness. To  
 determine whether the blood comes from the internal surface of  
 the mouth, fauces, or cavity of the nose, is often important, not  
 more for the conduct of our treatment, than for the satisfaction  
 of the patient. This may be done by the examination of the



blood, which is found perhaps more so fluid as that from the  
 lungs, it is generally brought up without coughing & upon in-  
 spection the sputa often becomes cordant. It may however be  
 brought up by coughing, in this case, we are guided by the ap-  
 pearance of the blood, & the absence of those symptoms which  
 have hitherto been pointed out as incident to a discharge from  
 the lungs, together with the age, habits & predisposition.  
 From *Hæmatemesis* it is rarely distinguished, as the blood  
 usually appears in greater quantities from the stomach than  
 from the lungs, it is of a darker colour, more grumous, & mixed  
 with the contents of the stomach, to which may be added, that  
*Hæmatemesis* is of varied rare occurrence, *Hæmoptoe*  
 is seldom unaccompanied by some morbid affection of the  
 stomach, as acidity, pain, & a sense of weight & fullness, to-  
 gether with the total absence, of any pulmonary affection,  
 and the great prostration of the system particularly the heart  
 & arteries, incident to *Hæmatemesis*, doubtless the result of the  
 intimate sympathetic connection of the stomach with the  
 brain, the influence of which so greatly modifies the circula-  
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try action. Females are said to be more obnoxious to Haemorrhages, than males, in consequence of suppressed menses, the stopping of blood becoming vicarious to that discharge, & that circumstance may assist in making a correct diagnosis.

Of the Prognosis. In drawing correct prognostic deductions of the result of Haemoptyses, there is some difficulty, so that a divided opinion, in the commencement of an attack, can rarely be sustained on. It may be considered as matter of little danger, when the discharge is not excessive, when no symptoms of Pulmonary Consumption accompany, or have preceded the Haemorrhage, when it leaves behind no cough, dyspnoea, pain in the breast, or any other affection of the lungs, & also its happening to persons of a strong & vigorous constitution. Frequent discharges of blood are perhaps more of such serious import as those occurring under different circumstances in some diseases, particularly Pneumonia Pleuritis & various forms of fever, so far from being detrimental, it is considered ominous of a favourable result. The circumstances leading to an infavourable prognosis are, the discharge of



very large quantities of blood, being dangerous, in proportion to the size of the vessel from which the discharge proceeds, the frequent recurrence of the attacks, and its taking place in persons of a lax & delicate habit, in whom the predisposition to this disease exists. *Hæmoptysis* cannot however be considered as always a primary disease, it is often symptomatic & is almost the uniform attendant of *Phthisis Pulmonalis*, a disease so intractable, so repulsive, & requiring to the resources of our art, as justly to be reckoned among the *Opæbra Medicorum*.

*Post-Mortem* examinations, when it proves immediately fatal from the rupture of a considerable vessel, or in any other way, show a quantity of Clotted or Coagulated blood, between the pleura & lungs, the air cells, & minute ramifications of the bronchia are filled with blood of the same appearance, & there is commonly some marks of inflammation about the parts from which the blood has issued. When it terminates in *Phthisis* as has been mentioned above is sometimes the case, the morbid appearances on the



same as those exhibited in bodies dead of that disease, as tuberculated, granulated, ulcerous, & some Cancerous lungs causing excavations in their substance, erosion of the vessels &c.

*Of the Treatment.* In entering upon this part of the subject, a question at once presents itself. Does it become necessary to interfere in cases of hæmorrhage? This question has doubtless arisen from the Stahlian doctrine promulgated on this subject, which we may here suppose our tentatives permit it to rest in silence with its ingenious author. It is enough to say, that, to disagree with its associates is proper. Hæmorrhage cannot be considered temporary, on the contrary, it should be avoided, and new life to the conduct of nature, too often blind in the direction of her will. Considering it, then, for, necessary to interfere with the operations of nature, I shall proceed to the enumeration of the remedies usually employed in such cases; having regard to the opposite states of the system, and first of Actus Hæmoptysis. These are prescribed to answer two indications, 1<sup>st</sup> To



suppress the evacuation of blood, by diminishing the activity of the circulation; 2<sup>d</sup> To subvert that morbid state of the system, upon which its continuance and return depends. As preparatory to the first, the patient should be ordered to bed, his shoulders elevated, his extremities extended, the room should be well ventilated, of a cool temperature, and every source of irritation avoided, in short, the best antiphlogistic measures are to be instituted.

The first measure which presents itself is to reduce the state of the system, & the appearance of the blood slowly to demand it. The best practice, is to detract a large quantity at a time, and not by small & repeated bleedings. To this, however, objections have been urged, by our countrymen, & I have had occasion <sup>to mention</sup> before, it is deemed wholly inimical & slow & deleterious, which opinion is corroborated by a second, whose <sup>prudent</sup> judgement, has led him to say, that, "those who are too fond of using the lancet, should remember, that, as yet there is no repeal of the sixth commandment." On the contrary, may be formed the concur-

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next testimony of many is in support of the proposition "that  
 increase of arterial action" says a modern writer "which cau-  
 ses the rupture of the vessel, or effusion of blood in any  
 other way, is only to be removed by the lancet." and add-  
 ing it may be added even be substituted for it. I am  
 aware that bleeding is said to increase that plethora which  
 it was intended to remove, as regards this, it may be asked  
 who will not take in the aid of the other antiphlogistic  
 measures to prevent the recurrence of this state of plethora  
 which a timely resort to the lancet has removed. This  
 should be aided by cupping or leeching either on the back  
 or breast, as may be thought best. A tea or table spoonfull  
 of finely powdered Elixinary Salt, held in the mouth &  
 swallowed by degrees, is sometimes found beneficial: Cold  
 applications to the throat, arillae, & particularly to the tem-  
 ples & feet should not be neglected: The use of cold drinks,  
 wrapping the body in cloths wet with vinegar & water, even  
 the immersion of the body in cold water, or suddenly speak-  
 ing it have been recommended strenuously by some, which

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practice, has received the sanction of the truly sagacious  
 Darwin.

The refrigerants, particularly niter, are highly recommended  
 it may be given either alone, in combination with Tartar Eme-  
 tic, or in form of the nitrous powder. Dickson the author of  
 a small treatise on this disease, in the 11<sup>th</sup> Vol. of the Med.  
 Observations & Inquiries, published 1762, says of Niter "that  
 when given early in an Hemoptoe, I can almost equally de-  
 pend upon it, as upon the Cortex Peruvianus in a genuine he-  
 morrhage." Whether this is going too far or not, I will not pre-  
 tend to decide; it is undoubtedly a valuable article & contributes  
 much towards a cure. The occasional use of lavation, such  
 as manna, tamarinds, Castor oil, Sulphate of Soda or Mag-  
 nesia, the Tartrate of Potash & Soda, and others of this class  
 (with the exception of the Phosphates, which from their ex-  
 citing character are not so well suited to the case as  
 those formerly mentioned) will be found highly beneficial.  
 Aetio-sparing is perhaps in this as in all other pulmonary  
 diseases, prejudicial. Vascular action being now sufficiently



subdued, blisters, or leucopisms, to the breast or back, will be of much advantage & are not to be overlooked, they bring about a violent action by their counter irritation, & hence prove of the almost niltyg. It then may be added ~~stimulate~~ irritating enemata which act on the same principle.

Nothing has been said of Emetics, so much celebrated in this disease. One of the most strenuous promoters of this practice was Dr Bryan Robinson of Dublin, Peter Willis and many of the present day, concur in their testimony in favour of their use. The same plan was adopted by Cullen but he was led to abandon them from the tendency of their operation. The precise circumstances under which they should be exhibited are not clearly pointed out. It is to ease, induced by previous depletion, bordering on profuse hemorrhage, I am induced to think, that they are by far the most appropriate. Dr Robinson supposes they act by constringing the extreme vessels, if so, they are ill suited to induced or profuse hemorrhage. Most of the cases related by him were of a chronic kind & I believe exclusively of this nature.



tion. If, therefore, such was their mode of action, it must be  
 hemorrhagic of this kind, in which they prove so advantage-  
 ous, and Rees who so loudly applauds the use of Opium  
 is, will not, as before said, admit the existence of active ha-  
 morrhage from the lungs. That they are most useful in  
 reduced cases of Haemoptysis, no doubt is entertained every  
 part, but as regards their mode of action, the opinion of  
 Dr Robinson is incorrect. Of their astringent effect I am abso-  
 lutely incredulous on the contrary they may be considered of  
 an opposite character but, it is this peculiar patholog-  
 ical state of the system, induced by Opium, changing the  
 morbid action of the vessels, especially the Capillaries,  
 which proves so advantageous. Much more benefit, we are  
 told, is to be expected from nauseating doses, & such is the  
 practice pursued in our own country, as well as on the  
 Continent of Europe. Of the class of Opium the Spanish  
 powder is, perhaps the best, & may be combined with a  
 small portion of Tartar Opium, which renders it more  
 active. To obtain its nauseating effects, small doses are





to be used as 6 to 2 grs, given at intervals as the case may require. This article is devoid of the acrimony of the metallic salts, & is not so harsh in its operation.

Many of the Narcotic medicines, have been used in Haemoptysis, as the various preparations of Hyoscyamus (Particularly the oil so much abused by Hoapland), Aconite, Digitalis &c. &c. From the peculiar action of the Digitalis it was even proposed by some, as a substitute for the lancet. & numerous were the reports in its favour. Experience has, however, taught that this is incorrect. "If after bleeding the pulse continues more rapid than in health and the system is too much debilitated to resort to direct depletion, we may then have recourse to Digitalis, & as one of our resources, on such occasions, it often displays its best powers." It should be given in small doses, so as just to affect the pulse & with the utmost caution when given in large dose, it is apt to excite vomiting, and by the violence of its action produce urticae & urticariae chief.



Of all the articles used in this disease Opium, in its  
 former, perhaps, most useful, under the circumstances  
 hereafter to be mentioned. Possessing although a stimu-  
 lant, so admirably the power of subduing irritation (so  
 incident to this disease) we are not surprised at the high  
 encomiums bestowed upon it. To label it as the wonder-  
 ful state of the system is improper, but, if, after vascular  
 action is subdued, there is much irritation, attended  
 with cough, Opium may justly be considered an her-  
 culean remedy, & unquestionably claims our admira-  
 tion & praise. To suppress hemorrhage, under such cir-  
 cumstances it is perhaps still better adapted, proving  
 as in the former case of the greatest utility.

Both the vegetable & fopie astringent, are used to  
 suppress the hemorrhage: of the first the *Vinos Catatus*  
 deserves the most confidence, but, they certainly justify  
 the superiority of the second. At the head of the Chap  
 stands the *Saccharum Saturnis*, which grows in doses of  
 from 2 to 5 gr. every 2 or 3 hours, either alone or combined



with Opium, some are great powers. We are, however, told by Cullen, that the Aconite is preferable; this, though a safer remedy, is unquestionably inferior to the former: his statement arising doubtless from an erroneous notion of these facts, considering it pernicious. Of the preparation of Copper & Lime little may be said: the Astringent solution is much esteemed by Mead is perhaps sometimes useful, but, more from its nauseating quality, than from its astringency. The Mineral & vegetable acids have been used, & in some cases with advantage: they will be found most useful in accelerating the discharges thus allaying the thirst often attendant on the disease.

As regards astringents it may be remarked, that they are, for the most part, improper in such cases as hemorrhage, & such is perhaps the most prevalent opinion on this subject. It is said by Good that general astringents are here counterindicated, however useful they may be in superfluous hemorrhage. When given, therefore, discretion should precede, so long as there is increased



vascular action, the system being, when action is said, in a state somewhat analogous to that of paper hemorrhage.

Of the Leichen Islandicum one much and little need be said; being a very misanthropic article, it is probable, that, in this way, if at all, it may be found useful & not from any action properly peculiar to it.

The state of the patient's mind undoubtedly influences the body, & when there is a disposition to indulge in any of the depressing passions, it may, in many cases, be permissive. They become & cheer very energy of the body like the streams of Lethe, and 'tis thus that "the brain grows thus in the midst of wealth, the limbs, too, though surrounded by cordials, & the man voluntarily starves himself in the garner of plenty."

I am now to treat of the 2<sup>d</sup> division or Papian Hemoptysis. Having formerly pointed out in what this consists, shall proceed to the plan of Treatment to be adopted. The medicine used in this form of Hemoptysis





Mepytis are chiefly of the Corrosive kind. Of Bones  
 as I have given my view in a former part of this of  
 say, I shall, therefore, say nothing of their uses. The asthe-  
 gic articles become here the bulwark of safety, & as be-  
 fore said, the Rectate of Lead, stands preeminent, what-  
 ever as directed above. Of Wine, Porter, and other Stimuli,  
 nothing need be said, they may certainly be considered  
 inferior to Opium in every respect, & should not be sub-  
 stituted for it. As a tonic in this state of the sys-  
 tem, the Peruvian Bark has long held an almost un-  
 rivaled sway. It is certainly of utility, but as few will  
 take a sufficient quantity to have any decided advan-  
 tage, more benefit may perhaps be derived from some of  
 the weaker preparations of this article particularly the  
 Quinine. For the same purpose the Calybeate preparation  
 especially the *Tinctura Ferri Muratis*, or the Sulphate  
 of Iron, also some of the preparations of Copper, are prescrib-  
 ed & often with much advantage. To these may be  
 added the Mineral Acids, the best of which is the Acidum



*Sulphuricum Aromaticum*, together with many others of the same class, an enumeration of which is unnecessary.

Cold applications are here of divided utility, when properly timed, can be, however, resorted to with use from the liability of the system to atomic congestions. Such congestions flow from weakness of vascular action, when occurring, are to be removed by the use of blisters, sinapisms, dry cupping, or in some cases the abstraction of a small quantity of blood, by cups or leeches, by irritating enemata &c.

Nothing has as yet been said of abstinence from drink, as an important measure in *Hæmoptyses*. Two cases are recorded in the 3<sup>rd</sup> Vol. of the *Med. Facts & Observations*, where this plan was completely successful; the quantity allowed being only a pint daily. Poulley in his treatise on *Mæmorrhagia*, recommends this plan of treatment as useful. That it may prove advantageous in both cases by preventing plethora, we are not disposed to doubt, hence its application to hæmorrhage both of an active and passive nature.

Having considered the means necessary to avert the



first indication, the second now claims attention, which constitutes the Prophylaxis. In laying down proper Prophylactic directions, I shall only mention them in a general point of view. Each person & Case has some peculiarities, hence must rely upon sagacity and judicious discrimination. They are as follows 1<sup>st</sup> Care should be taken to avoid whatever may cause excitement, as indulgence in violent passions, irregularities in eating or drinking, in short a complete avoidance of all the exciting causes. The diet should be low, consisting of milk, beaten &c, if meats are allowable, the white meats are to be preferred. The meat, small, frequent, and well regulated so that the stomach may properly perform its healthy functions. It should, however be adapted to the different state of the system, being either cordiac, & corroborant, or other wise as the case may require.

2<sup>d</sup> Tostrate taking cold, by proper clothing, which should be warm, particularly flannels worn next the skin, the feet should be kept dry & warm, exposure to a



damp cool air, is always to be avoided, & <sup>the</sup> sleeping in damp shuttles & rooms.

3<sup>d</sup> To take such exercise as will impart tone to the system; the best is sailing, swimming, travelling in any easy carriage, or in some cases, riding a short distance on horse back. Fatigue is in no case to be induced.

4<sup>th</sup> To watch with attention the pulse & respiration, any disorder in either, must be immediately removed by the proper means.

5<sup>th</sup> The frequent use of Emetics, is said to prove extremely advantageous, by keeping up the equality in the circulation, diverting blood from the lungs, removing cutaneous constriction, & by calming the general condition of the system.

6<sup>th</sup> To have recourse to Sanguifugues as a dernier resort.

The emphysem made on the mouth by a Sanguifuge, must be treated with caution, & by the general and restorative operation of the Sanguifuge on the system, it may entirely supplant the disease, substituting its





one position as in place of it." It should however be noted, before that when connected with a chronic disease as is not infrequently the case, or with Tubercular Consumption, it is for the most part wholly incurable. Connected with pulmonary Consumption, Haemoptoe, may be considered the effect of a disease, which will too often baffles the concentration, & the most judicious & talented. This disease (pulmonary Consumption) being for the most incurable it becomes our duty to support declining life by cordial & strengthening remedies; to comfort the unhappy by our unceasing attentions; to solace them in their hours of despondency, with the golden prospects of brighter days, & above all, to direct them to the ever-mourning hand of an all-wise Creator whose,

..... "Law eternal doth decree  
That all things born shall mortal be."

In drawing to a close this imperfect essay, just as my feelings demand, that I should tender to each of



the Professor, my thanks & acknowledgements for the invaluable instructions derived from them, by their unwearied and indefatigable exertions, to promote a science the benefits of which are alike felt by all. That you, Gentlemen, may long live & enjoy the honour & reputation, you so justly merit, that you may continue to enrich Medicine, with others & still greater discoveries, abundantly provided by such, as shall thus adorn your names imperishable, renown & do honour to the age and Land which gave you birth, is my warm wish. Nor can I feel less gratified in knowing that you have left the path illumined by the brightness of your footsteps still open, and that Science continues to hold out allurement and reward, to her persevering and industrious votaries.

Y<sup>rs</sup>  
Mrs.

